

**Quality and Productivity Commission**  
**32<sup>nd</sup> Annual Productivity and Quality Awards Program**  
**"Innovating for Impact"**

**2018 APPLICATION**

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

**NAME OF PROJECT: HEPATITIS A OUTBREAK RESPONSE**

**DATE OF IMPLEMENTATION/ADOPTION:** MARCH 2017

(Must have been fully implemented for a minimum of at least one year - on or before July 1, 2017)

**PROJECT STATUS:**  Ongoing  One-time only

**HAS YOUR DEPARTMENT PREVIOUSLY SUBMITTED THIS PROJECT?**  Yes  No

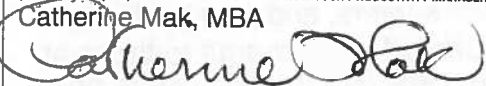
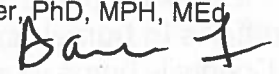
**EXECUTIVE SUMMARY:** Describe the project in 15 lines or less using Arial 12 point font. State clearly and concisely what difference the project has made.

1 In March 2017, a hepatitis A outbreak was declared in San Diego County, followed by  
 2 an outbreak in Santa Cruz County. The Department of Public Health (DPH) quickly  
 3 sprang into action given its proximity to San Diego County and the potential for a large-  
 4 scale outbreak affecting the County's most vulnerable populations, specifically the  
 5 homeless and persons who use illicit drugs. Because of the County's large homeless  
 6 population and that hepatitis A can spread rapidly in the absence of symptoms, it was  
 7 imperative that DPH implement preventive actions before to prevent or limit the impact  
 8 of an outbreak. Once a local outbreak was declared in September 2017, DPH quickly  
 9 implemented a multi-pronged, multi-sectoral response with various partners, including  
 10 surveillance and rapid vaccination of contacts, stakeholder engagement, an aggressive  
 11 plan to vaccinate high-risk persons, improvement of sanitation conditions in homeless  
 12 encampments and other locations, and the development of internal and external  
 13 policies. As a result, the number of County hepatitis A cases was much lower than in  
 14 other jurisdictions. Only 1 person has been diagnosed since October 2017. DPH's  
 15 efforts not only saved significant dollars but also potentially averted at least 25 deaths.

**BENEFITS TO THE COUNTY**

(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$ 14 MILLION	\$	\$	\$ 14 MILLION	<input type="checkbox"/>

ANNUAL = 12 MONTHS ONLY

<b>SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS</b> Department of Public Health 313 N. Figueroa Street, Suite 801 Los Angeles, CA 90012		<b>TELEPHONE NUMBER</b> 213-240-8117
<b>PROGRAM MANAGER'S NAME</b> Jeffrey D. Gunzenhauser, MD, MPH		<b>TELEPHONE NUMBER</b> 213-288-7269  <b>EMAIL</b> jgunzenhauser@ph.lacounty.gov
<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b> <small>(PLEASE CALL (213) 893-0322 IF YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER'S NAME)</small> Catherine Mak, MBA 	<b>DATE</b> 7.2.2018	<b>TELEPHONE NUMBER</b> 213-288-7240  <b>EMAIL:</b> cmak@ph.lacounty.gov
<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b> Barbara Ferrer, PhD, MPH, MEd 	<b>DATE</b> 7.2.2018	<b>TELEPHONE NUMBER</b> 213-288-8117

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**1<sup>st</sup> FACT SHEET – LIMITED UP TO 3 PAGES ONLY:** Describe the **challenge(s), solution(s), and benefit(s)** of the project to the County. What quality and/or productivity-related outcome(s) has the project achieved? Provide measures of success and **specify assessment time frame**. Use Arial 12 point font.

**Challenge:** In March 2017, San Diego County experienced a large outbreak of hepatitis A, particularly among persons who are homeless or use illicit drugs. A very high 3-4 percent case-fatality rate and nearly 70% hospitalization rate was observed. Given our proximity to San Diego County and the appearance of cases in Santa Cruz County, DPH began to mobilize in April 2017. In August 2017, 5 cases were imported from San Diego County and spread to 3 other persons. A local outbreak was declared by DPH on September 19, 2017. Because of the County's sizeable homeless population, and the ability of hepatitis A to spread in the absence of symptoms, there was high concern that the outbreak would spread quickly with a devastating impact on the most vulnerable populations.

**Solutions:** DPH developed and implemented a multi-pronged, multi-sectoral response in coordination with various partners including DHS/Emergency Medical Services Agency, the Department of Human Resources, LA County Fire, and the LA County Sheriff. **Surveillance and rapid vaccination of contacts** decreased response time to case reports. Rapid Response Teams (RRTs) were available to deploy 24 x 7 when a new case was identified in the homeless or substance use communities. RRTs included public health nurses and doctors working, as needed, with outreach workers from homeless service organizations and law enforcement agencies. RRTs canvassed the streets near newly diagnosed cases to rapidly identify and vaccinate others at risk. To assure prompt evaluation of individuals with possible hepatitis A, DPH requested primary care providers to contact DPH immediately while such persons were still under their care. DPH also requested that Emergency Departments complete hepatitis A testing before discharging high-risk individuals.

**Efforts to educate the public and other key stakeholders** included a major public awareness campaign with advertisements on public bus and rail lines, information to over 100,000 stakeholders, tailored multi-lingual materials for those at risk, over 500 in-person trainings, strategic media engagement resulting in over 80 news print articles and 14 TV segments in the first 2 weeks of response efforts, a toll-free line for stakeholders wishing to conduct vaccination outreaches, public information via the County 2-1-1 info line, and communication with 33,000 restaurants to reduce transmission risk. **Aggressive efforts to vaccinate high-risk persons** included outreach teams targeting homeless persons in jails, shelters, and other institutions. Vaccination was promoted among first responders, food servers, and personal care workers. Regular community vaccination clinics were offered at no charge to those at risk. Over 600 vaccination outreaches were conducted. DPH vaccinated over 36,000 high-risk persons. Health plans and community providers also participated in efforts to vaccinate their members. **Improving sanitation conditions in homeless encampments and other locations** was critical as the County is home to nearly

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60,000 homeless persons, and poor access to hygiene facilities is a major risk factor for hepatitis A. Shelters across the County were inspected and given a tool kit with educational information, resources and policies. Seventy-five winter shelters, 50+ homeless shelters, and 150 agencies that distribute food to the homeless participated. Over 50 large homeless encampments were surveyed in partnership with the Los Angeles Homeless Services Authority and the Department of Public Works to assess the need for additional toilets, showers, and handwashing facilities, culminating in the development of deployment plans. **The development of internal and external policies** allowed for expanded use of federal 317-funded vaccine, additional resources from other County departments and cities, authority to extend scope of practice for paramedics to administer vaccines, prioritizing vaccine allocation in the event of a shortage, preventing homeless patients with a possible diagnosis from being discharged until status was confirmed, and providing isolation beds for longer-term care during a homeless patient's contagious period. To increase the number of staff available as vaccinators, the local Emergency Management Services Agency (in coordination with DPH) sought and obtained authority from the State to extend the scope of practice of paramedics to administer vaccines.

**Benefits:** The 5 strategies highlighted above went far beyond "business as usual" disease control efforts. Success lay in DPH's advance monitoring of outbreaks in San Diego and Santa Cruz and preparing well ahead of the local outbreak declaration. Coordination and collaboration with diverse public and private partners also contributed to DPH's success. Given the County's 10 million population, 4,000+ square-mile area, and large at-risk population, DPH's ability to prevent evolved into a large-scale outbreak is extraordinary. About \$2 million was spent over 4 months, with nearly 2/3 in personnel salaries and \$600,000 on medical and other resources. DPH also received federal 317-funded vaccines valued at \$2 million. These costs represent a fraction of the potential medical costs had hundreds of homeless patients been infected, about 70% of whom would likely have been hospitalized. A conservative estimate is that 1,000 cases, with 700 hospitalizations and 25 deaths were prevented. The estimated average cost of treatment is over \$740 per outpatient case, \$6,900 for inpatient treatment, and \$20,000 to hospitalize a patient with fulminant disease (not including liver transplant or death). Collective costs avoided for treating 1,000 individuals during FY1819 would have been over \$14 million. The County's efforts not only saved significant dollars but also potentially averted at least 25 deaths. As of April 2018, San Diego County has seen 587 cases, 402 hospitalizations, and 20 deaths. Santa Cruz County has had 76 cases, 33 hospitalizations, and 1 death. In LA County, rigorous case detection found a total of 18 cases, with 8 hospitalizations and no deaths. Only 1 person was diagnosed after November 2017. In summary, a swift and innovative response, strong relationships with a wide spectrum of partners, effective leadership and dedicated staff helped to avert a public health disaster.

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**Linkage to the County Strategic Plan – 1 page only.** Which County Strategic Plan goal(s) does this project address? Explain how. Use Arial 12 point font.

**Goal I. Make investments that transform lives, Strategy I.1: Increase our focus on prevention initiatives**

The investment that DPH placed into this effort transformed lives in a variety of ways. Prevention-focused activities, such as, vaccination of high-risk individuals, education, community mobilization, and improving sanitation at homeless encampments prevented illness and deaths in countless County residents. This, in turn, prevented reliance on County health care and other systems by those who would have been infected with hepatitis A. In addition, the efforts of the County led to improvements in living conditions, access to care, and future response efforts in ways that will transform lives well into the future.

**Goal III. Realize tomorrow’s government today, Strategy III.3: Pursue operational effectiveness, fiscal responsibility and accountability**

**III.3.1: Maximize revenue.** The \$2 million spent from existing resources were efficiently utilized to provide the maximum delivery of preventive service to at-risk populations. In addition, DPH leveraged its relationships with state and federal counter-parts to receive \$2 million in federal 317-funded vaccines, which in turn, enhanced DPH’s ability to use other resources to support additional prevention activities.

**III.3.2: Manage and maximize County assets.** DPH’s partnerships with multiple County departments, hospitals, health plans, and community organizations helped avoid reliance on DPH to solely to provide vaccinations and related prevention services to all at-risk groups in the County, while also helping other agencies to quickly fulfill their vital roles in supporting the overall effort to prevent a large-scale outbreak.



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**COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFITS TO THE COUNTY):** If you are claiming cost benefits, include a calculation on this page. Please indicate whether these benefits apply in total or on a per unit basis, e.g., per capita, per transaction, per case, etc. You must include an explanation of the County cost savings, cost avoidance or new revenue that matches the numbers in the box. Remember to keep your supporting documentation. Use Arial 12 point font

**Cost Avoidance:** Costs that are eliminated or not incurred as a result of program outcomes. Please indicate whether these are costs to the County or to other entities.

**Cost Savings:** A reduction or lessening of expenditures as a result of program outcomes. Please indicate whether these were expenditures by the County or by other entities.

**Revenue:** Increases in existing revenue streams or new revenue sources to the County as a result of program outcomes.

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\$ 14 MILLION	\$ 14 MILLION	\$ 0	\$ 14 MILLION	<input type="checkbox"/>

**ANNUAL = 12 MONTHS ONLY**

**Actual/Estimated Cost Avoidance**

The estimated cost for treating 1,000 individuals would have been over \$14 million. Had homeless patients been infected with hepatitis A, about 70% would likely have been hospitalized. A conservative estimate is that 1,000 cases, with 700 hospitalizations and 25 deaths, were prevented. The estimated average cost of treatment is over \$740 per outpatient case, \$6,900 for inpatient treatment, and \$20,000 to hospitalize a patient with fulminant disease (not including liver transplant or death). In total, DPH's outbreak response resulted in a cost avoidance of \$14 million.

Please note that DPH spent about \$2 million over 4 months, with nearly 2/3 in personnel salaries and \$600,000 to purchase needed medical and other supplies/resources. These resources were put to best use as \$2 million in federal 317-funded hepatitis A vaccines from the State avoided the expenditure of local funds to purchase vaccine.

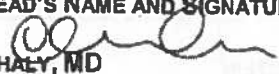
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**FOR COLLABORATING DEPARTMENTS ONLY**

*(For single department submissions, do not include this page)*

<b>DEPARTMENT No. 2 NAME AND COMPLETE ADDRESS</b> DEPARTMENT OF HEALTH SERVICES, EMERGENCY MEDICAL SERVICES AGENCY-313 N. FIGUEROA STREET, 9 <sup>TH</sup> FLOOR, LOS ANGELES, CA 90012	
<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b> <i>Lisa Finkelstein</i> LISA FINKELSTEIN EMAIL: <u>LFINKELSTEIN@DHS.LACOUNTY.GOV</u>	<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b>  CHRISTINA R. GHALY, MD EMAIL: <u>CGHALY@DHS.LACOUNTY.GOV</u>
<b>DEPARTMENT No. 3 NAME AND COMPLETE ADDRESS</b> LA COUNTY SHERIFF-4700 RAMONA BOULEVARD, ROOM 330, MONTEREY PARK, CA 91754	
<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b> GLEN JOE EMAIL: <u>GCJOE@LASD.ORG</u>	<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b> JIM McDONNELL, SHERIFF EMAIL: <u>JMCDONNE@LASD.ORG</u>
<b>DEPARTMENT No. 4 NAME AND COMPLETE ADDRESS</b> LA COUNTY FIRE DEPARTMENT-1320 N. EASTERN AVENUE, LOS ANGELES, CA 90063	
<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b> ROXANNE BENAVIDES-ORTEGA EMAIL: <u>ROXANNE.BENAVIDES@FIRE.LACOUNTY.GOV</u>	<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b> DARYL OSBY, FIRE CHIEF EMAIL: <u>DARYL.OSBY@FIRE.LACOUNTY.GOV</u>
<b>DEPARTMENT No. 5 NAME AND COMPLETE ADDRESS</b> LA COUNTY DEPARTMENT OF HUMAN RESOURCES-500 WEST TEMPLE STREET, ROOM 585, LOS ANGELES, CA 90012	
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<b>DEPARTMENT No. 6 NAME AND COMPLETE ADDRESS</b>	
<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b> EMAIL: _____	<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b> EMAIL: _____
<b>DEPARTMENT No. 7 NAME AND COMPLETE ADDRESS</b>	
<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b> EMAIL: _____	<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b> EMAIL: _____

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<b>DEPARTMENT NO. 5 NAME AND COMPLETE ADDRESS</b> LA COUNTY DEPARTMENT OF HUMAN RESOURCES-500 WEST TEMPLE STREET, ROOM 585, LOS ANGELES, CA 90012	
<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b>  DAROLYN JENSEN EMAIL: <u>DJENSEN@HR.LACOUNTY.GOV</u>	<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b>  LISA GARRETT, JD EMAIL: <u>LGARRETT@HR.LACOUNTY.GOV</u>
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**PRODUCTIVITY MANAGER'S NAME AND SIGNATURE**

LISA FINKELSTEIN

EMAIL: LFINKELSTEIN@DHS.LACOUNTY.GOV

**DEPARTMENT HEAD'S NAME AND SIGNATURE**

CHRISTINA R. GHALY, MD

EMAIL: CGHALY@DHS.LACOUNTY.GOV

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**PRODUCTIVITY MANAGER'S NAME AND SIGNATURE**

GLEN JOE

EMAIL: GCJOE@LASD.ORG

**DEPARTMENT HEAD'S NAME AND SIGNATURE**

JIM McDONNELL, SHERIFF

EMAIL: JMCDONNE@LASD.ORG

**DEPARTMENT NO. 4 NAME AND COMPLETE ADDRESS**

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**PRODUCTIVITY MANAGER'S NAME AND SIGNATURE**

*Roxanne Benavides-Ortega*  
 ROXANNE BENAVIDES-ORTEGA

EMAIL: ROXANNE.BENAVIDES@FIRE.LACOUNTY.GOV

**DEPARTMENT HEAD'S NAME AND SIGNATURE**

*Daryl Osby*  
 DARYL OSBY, FIRE CHIEF

EMAIL: DARYL.OSBY@FIRE.LACOUNTY.GOV

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**DEPARTMENT HEAD'S NAME AND SIGNATURE**

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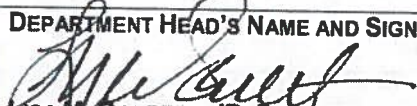
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